



DEPARTMENT OF THE NAVY
NAVAL EDUCATION AND TRAINING PROFESSIONAL
DEVELOPMENT AND TECHNOLOGY CENTER
6490 SAUFLEY FIELD ROAD
PENSACOLA, FLORIDA 32509-5237

IN REPLY REFER TO:

NETPDTTCINST 1800.1A

OOR
16 FEB 2001

NETPDTTCINST 1800.1A

Subj: **RETIREMENT AND FLEET RESERVE TRANSFERS**

Ref: (a) MILPERSMAN 3810200

Encl: (1) Sample Certificate of Commendation
(2) Fleet Reserve/Retirement Ceremony Checklist
(3) Fleet Reserve Application/30-year Retirement Worksheet
(4) National Museum of Naval Aviation Special Events/Facilities Utilization Request Form

1. **Purpose.** To issue guidance for retirement and Fleet Reserve transfers.

2. **Objective.** To fully recognize and properly honor individuals retiring from active military service or transferring to Fleet Reserve status.

3. **Cancellation.** NETPDTTCINST 1800.1.

4. **Revision.** Since this a complete revision marginal annotations have been omitted. This instruction should be read in its entirety.

5. **Discussion.** This command is fully committed to honor individuals transferring to the Fleet Reserve or Retired List per reference (a), and to maintain traditions of the United States Navy. Recognition will be in keeping with personal desires of the member and when appropriate, will include a ceremony and assembly of personnel to mark the retiree's final day on active duty; to render proper honors; and to bestow suitable awards, letters, certificates and mementos. Maximum command participation is a must in order to meet the intent and objectives of this instruction.

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6. **Action.** Proper coordination, cooperation, and advance planning are necessary to conduct proper Retirement/Fleet Reserve Ceremonies. To that end, the following responsibilities are assigned:

a. Commanding Officer

(1) Institute procedures to ensure appropriate recognition is rendered to individuals transferring to the Fleet Reserve or Retired List.

(2) Serve as presiding officer during ceremonies, if the member so desires.

b. Executive Officer

(1) Provide appropriate facilities to support ceremonies.

(2) Serve as primary assistant to the Commanding Officer during ceremonies.

(3) Preside over ceremonies in the absence of the Commanding Officer.

c. Command Master Chief

(1) When required, assist in resolving any problem that may interfere with a person's retirement/transfer to the Fleet Reserve. Actions may require internal and/or external command coordination.

(2) Present Retirement Creed for retiring Chief, Senior, and Master Chief Petty Officers.

d. Department Head

(1) Remain abreast of all actions required, completed, and pending. Assist with those actions as required.

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(2) Ensure appropriate Retirement Certificate of Commendation (enclosure (1)), and/or award nominations are submitted in sufficient time to be available for presentation at the ceremony.

(3) Ensure maximum command participation is obtained for each ceremony to properly recognize and to give appropriate respect to the individual retiring or transferring to the Fleet Reserve.

e. Code Leading Chief Petty Officer -

(1) Assign a sponsor immediately after processing a Fleet Reserve/retirement request chit and advise the Command Master Chief of person assigned. The sponsor should be selected based on the desires of the retiree.

(2) Keep the department head advised of all progress and/or problems related to the retirement/Fleet Reserve transfer request. Assist with resolving problems, as required.

f. Command Career Counselor

(1) Brief the retiring members and sponsors to ensure they fully understand their individual responsibilities as per enclosure (2).

(2) Ensure all appropriate documents, as per enclosure (2), are prepared and submitted to the Commanding Officer/Executive Officer in advance of established deadlines and returned in time for proper presentation.

(3) Ensure all necessary arrangements, internal and/or external, as per enclosure (2), are prepared and requests are submitted in advance of established deadlines to the respective agency/command such as MCPON letter, Color Guard, Chaplain, photographer, Plan of the Week and marquee input.

(4) If requested by retiree, prepare a ceremony program to be distributed prior to the ceremony.

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(5) Ensure all documents and material required at the ceremony are in place at least 30 minutes in advance.

(6) Serve as assistant during all presentations.

g. Sponsor

(1) Serve as primary coordinator and focal point for all actions related to the retirement/Fleet Reserve transfer. When required, assist the Command Career Counselor with and track the status of all requirements as per enclosure (2).

(2) Obtain the names of guest speaker, side boys, bell ringer, boatswain's mate, and master of ceremonies (MC), if appropriate. Provide this information to the Command Career Counselor at least one month prior to the ceremony.

(3) Make arrangements with the appropriate command/office to have a flag flown/ordered if desired by the retiring member; or coordinate with the Command Duty Officer to have flag flown locally.

(4) If the ceremony is to be held at the National Museum of Naval Aviation, contact museum to secure date/time desired and submit enclosure (3) at least 45 days in advance.

(5) Coordinate with the Command Career Counselor to collect and store all awards, letters, certificates, mementos, etc, related to the ceremony.

h. Retiree

(1) Submit a Fleet Reserve Application Worksheet (enclosure 4) and special request chit for transfer to the Fleet Reserve or Retired List at least six months prior to, but no earlier than 18 months prior to the date requested.

(2) Coordinate with the sponsor to ensure all necessary information is provided and all actions are completed.

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(3) Keep appropriate personnel, especially the sponsor and the Command Career Counselor, advised of progress and problems.

(4) Attend the Transition Assistance Program (TAP) class at NAS Pensacola at least 6 - 12 months prior to retirement date. Scheduling must be made through the Code Career Counselor or Command Career Counselor.

i. President of CPOA

(1) Will present retiring CPOA members with their shadow box unless otherwise directed by the retiree.


M. L. MORAN

Distribution: (NETPDTCINST 5216.1D)
Lists I & II

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CERTIFICATE OF COMMENDATION

Presented to

(Complete Rate and Name)

IN RECOGNITION FOR SERVICES AS SET FORTH HEREIN

On the occasion of your (retirement/transfer to the Fleet Reserve), I am pleased to commend you on behalf of the President, the Secretary of Defense, the Secretary of the Navy, and the Chief of Naval Operations for your outstanding performance, not only while here at Naval Education and Training Professional Development and Technology Center, but throughout your Navy career.

During your _____ years of naval service, you have successfully met the challenges and demands of a wide variety of assignments. Your sea tours included

Your shore tours included _____

While at Naval Education and Training Professional Development and Technology Center, you were assigned to the _____ Branch of the Navy Advancement Department. Your performance as the _____ has been truly outstanding.

You can be justifiably proud of your important and valuable contributions. For your dedication throughout your naval career you have been awarded the (list awards in order of precedence).

It is indeed a pleasure to wish you "fair winds and following seas" on your (retirement/transfer to the Fleet Reserve). You have earned the traditional Navy "Well Done!" On behalf of the members of this command and the United States Navy, I wish you every success in the future.

M. L. MORAN
Captain, U. S. Navy
Commanding Officer

(Submit this letter to the Military Support Office at least two weeks prior to requested ceremony date.)

Enclosure (1)

NETPDTCINST 1800.1A
RETIREMENT/FLEET RESERVE CEREMONY CHECK LIST 16 FEB 2001

Rate/Desig/Name:	Phone # (work/home):	Code:
Spouse's Name: Yrs. Married: Military or Former Military: Y or N	Years of Service: FLTRES Date:	Sponsors Name/Phone #:
No. of Children (Age):	Ceremony Date/Time:	Ceremony Location:
Forwarding Address:	Ceremony Uniform:	Ret. Invitation: Y/N No:

COMMAND CAREER COUNSELOR RESPONSIBILITIES

Responsibility	Member Desires	Action Completed	Responsibility	Member Desires	Action Completed
Submit Marquee Request			MCPON Letter/Creed request		
Submit Photographer Request			Obtain CMC to present MCPON Ltr		
Provide National Ensign			Presidential Certificate		
Prepare National Ensign Certificate (If flag is flown in Sauflay)			Retirement/Fleet Reserve Certificate		
Obtain a Chaplain			Prepare Spouse LOA		
Reserve Color Guard			Prepare Ceremony Program		
Prepare/Submit POW note			Bullets, bell, carpet, podium, chairs, flags, etc.		

CODE LCPO/SPONSOR RESPONSIBILITIES

Responsibility	Member Desires	Action Completed	Responsibility	Member Desires	Action Completed
Reserve ceremony location (Gazebo, Conference Room, Base Theater, Hangar 807, Museum)			Obtain Shadowbox from SCPOA (provided member is in good standing)		
End of Tour Award			Flag Passing		
Provide List of Duty Stations/Bio (Engraving) to CCC			Prepare/Submit NETPDTC LOA		
Prepare location of ceremony (set up chairs, incl. music/mike etc.)			Have National Ensign flown		

RETIRING MEMBERS RESPONSIBILITIES

Obtain a Presiding Officer/Guest Speaker			CO/XO Interview (if involved in retirement ceremony)		
Obtain a Master of Ceremonies			Obtain a Boatswain's Mate		
Obtain a Bell Ringer			Obtain Sideboys		
Provide CCC info. for ceremony prog. & list of past assignments			Obtain a TAP quota-provide CCC copy of DD Form 2648		

Enclosure (2)

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FLEET RESERVE APPLICATION/30 YEAR RETIREMENT
WORKSHEET/INSTRUCTIONS
OPINS FORMAN

Screen 1**OPINS FORMAN UPDATE ENCORE/REQUEST DATA SCREEN (UNA)**

SSN: _____

NAME: _____
(Write first 4 letters of last name)FORMAN PROGRAM: _____
(M = FLETRES P = 30-yr retirement)

PPSUIC: 43081

DTG: (leave blank, press TAB.)

SCHD PHYSICAL: _____
(Member has started physical: Y or N)

READ SECNAVINST: (leave blank, press TAB)

CONTACT RELIEF: _____
(Is contact relief reqrd for this mbr: Y or N)

COMPL REQD TIME: (leave blank, press TAB)

RETIREMENT DATE: _____
(FLTRES date must be LAST day of the month)
(Retirement date must be FIRST day of the month)CANCEL REQ: _____
(Enter Y to cancel a previously submitted request, if not leave blank)REASON: _____
(If answer to Cancel Req is Y enter M(mbr reqsted cancellation) or O (other))

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FLEET RESERVE APPLICATION/30 YEAR RETIREMENT
WORKSHEET/INSTRUCTIONS/OPINS FORMAN

Screen 2

OPINS FORMAN UPDATE PROGRAM/REQUEST DATA SCREEN (UNC)

GOOD CONDUCT: *(leave blank, press TAB)*

SUBSTANCE ABUSE CODE: *(leave blank, press TAB)*

DATES: *(leave blank, press TAB)*

MISCONDUCT HISTORY: *(leave blank, press TAB)*

DATES: *(leave blank, press TAB)*

USNR: _____

(Enter Y or N if member is USNR or not)

SEAOs REQD TIME: _____

(Enter Y or N to signify if the mbr's EAOS is before the requested FLTRES/Ret. date and mbr has executed an extension of enlistment)

USN: *(leave blank, press TAB)*

TAR: _____

(Enter Y or N if member is a TAR or not)

MAT/TWLT/WAVER: _____

(Enter Y or N if member requires a Minimum Activity Tour waiver or if the mbr requires a PRD adjustment)

PRIOR SERVICE: _____

(Enter Y or N if member has prior service)

(If Y for Yes, forward documentation including dates to Pers-273)

HERO BENES REV: _____

(Enter Y or N to signify if mbr requests review of records for consideration of entitlement to benefits of extraordinary heroism)

DAYS LEAVE: _____

(Enter no. of days leave requested in three digits. If mbr does not intend to take any leave, enter three zero's)

PERMISSIVE TDY: _____

(Enter no. of days Permissive TDY requested in three digits. If mbr does not intend to take any TDY, enter three zeros)

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FLEET RESERVE/30 YEAR RETIREMENT
WORKSHEET/INSTRUCTIONS
OPINS FORMAN

Screen 3

OPINS ENCORE UPDATE COMMENTS (UN4) SCREEN

Enter **RT YES** if CO recommends Retirement
Enter **RT NO** if CO does not recommend.

Remarks

(Do not exceed 40 positions of remarks)

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SPECIAL EVENTS/FACILITIES UTILIZATION REQUEST FORM

The NMNA Director or his representative will approve or deny request for official, semi-official, and /or social functions at the Museum. Approval is contingent upon guidelines stated herein. Exceptions must receive approval from the NMNA Director. Only those functions eligible to be held elsewhere on NAS Pensacola are eligible for consideration. A military sponsor (retired, active duty or reserve) is required to sign this form, acknowledging conditions and accepting responsibility for compliance. All facility, equipment and service requirements should be listed herein. The Museum only ensures services and items which are requested in writing on this form, once approved.

--Please Print--

REQUESTING ACTIVITY _____

POINT OF CONTACT _____ (Name/Address & Phone #)

MILITARY SPONSOR _____ (Name/Address & Phone #)

TYPE OF FUNCTION _____ ESTIMATED ATTENDANCE _____

SPECIFIC AREA OF MUSEUM REQUESTED _____

DATE _____ TIME: from _____ to _____ SET UP TIME: from _____ to _____

PRACTICE (If required) DATE _____ TIME: from _____ to _____

DECORATIONS TO BE USED _____

SPECIAL REQUIREMENTS _____

SOUND SYSTEMS REQUIRED: _____ YES _____ NO.

_____ full sound system _____ small portable podium _____ remote mike

TO BE CATERED BY (And their signature) _____

EVENING FUNCTIONS to include: _____ Band _____ Dancing _____ Cocktail Party _____ IMAX Theater
_____ Sit Down Dinner Other _____

SPECIAL GUIDED TOUR _____ yes _____ no TOUR TIME from _____ to _____ (for # _____ people)
Must be arranged through the Volunteer Office at (850) 452-9304 Ext 143

THE GIFT SHOP WILL NOT NORMALLY BE OPEN FOR EVENING EVENTS.
Consideration for deviation from this policy must be arranged with the store directly at (850) 456-7037,
Monday-Friday 9:00 am – 4:00 pm.

IF YOU DESIRE TO HAVE AN IMAX FILM VIEWING as part of your event, arrangements must be made with theater management directly by calling (850) 453-2025 (Monday – Friday, 8:30 am – 4:30 pm).

_____ FOR MUSEUM USE _____

_____ APPROVED AS REQUESTED

_____ APPROVED AS NOTED

_____ DISAPPROVED

COMMENTS:

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NETPDTCONST 1800.1A

NAMNA "SPECIAL EVENTS" POLICY AGREEMENT

POLICY GUIDELINES & REGULATIONS:

Tentative reservations to utilize museum facilities may be made through the Museum's Public Affairs Office at (850) 452-3604 Ext 130. To confirm reservations, this form must be completed, signed by the caterer (if applicable) and by a military sponsor and returned to the museum **AT LEAST 30** days prior to the scheduled event for official approval.

The Blue Angel Atrium is the primary location for ceremonies and evening events. Dancing will not be permitted on carpeted or tiled surfaces. Portable dance floors must be rented for events held in the Atrium, which include dancing. Requests may be denied due to space limitations.

Events may not be held which by any interpretation serve as fund raisers.

Functions must not interfere with normal hours of operation, which are from 9:00 a.m. to 5:00 p.m. daily. Food and drink will not normally be served during the daytime operating hours. After hour functions will generally occur from 5:30 p.m. to 10:00 p.m.

The Museum has available on specific request the following: Stanchions, red carpet, podium, ceremonial bell, flags, chairs (up to 2,000), tables (up to 60, seating eight each) public address systems, speaker's platform, easels, trash receptacles and traditional military music - in the form of cassette tapes. Banners are not displayed for events, however appropriate signs may be placed on easels. (PA systems are Available at all times in the Atrium and in the Flight Deck during evenings only.)

Only the NAS Pensacola on-base caterers (Morale, Welfare and Recreation, or Naval Exchange) may cater or dispense food or drinks at the Museum. Exceptions may be made, as authorized by the Director, when MWR/NEX cannot provide catering service.

As decorations, no helium filled devices, balloons, confetti, glitter or open flame candles are permitted. Only candles surrounded by globes are acceptable.

Access to the museum for event guests, support personnel and equipment will be by designated prearranged access routes and points, to be defined by the Public Affairs Office.

USER REQUIREMENTS/RESPONSIBILITIES:

The requesting activity is responsible for setting up and breaking down all ceremonial and event equipment and for returning used areas to their original state of cleanliness and order - immediately following the event.

Users may be required to make arrangements for a security guard or guards and must provide their own signage to the event, if needed.

Users will be required to reimburse the NAMF's cleaners for after hour events. Contact Museum PAO, (850) 452-3604 Ext 130.

NASP Security assistance in controlling parking for large events is required. Requests for parking control is a sponsor responsibility. Requests for special parking arrangements should be directed to the Museum PAO.

Events may not be publicized in the media or promoted in print prior to official approval of this request form.

Guests will be restricted to designated event areas during evening functions and will be required to keep food and beverages within those areas. If users desire for guests to view areas of the museum other than the event site, special guided tours may be arranged through the Volunteer Tour Guide Coordinator at (850) 452-9304, Ext 143. There may be a fee associated with providing after hour tours.

Users will be required to reimburse the government for the cost of museum operation and security during after hour events. Reimbursement will normally be required for social events and for all events sponsored by other than active duty Navy organizations. This fee is based on the number of people attending the event and the number of security personnel required.

Users are to ensure that no food or beverages are brought into the museum without prior approval.

Users should obtain approval for any additional special requirements which are not a written part of the originally APPROVED utilization form. These approved requirements will be added to the form by the PAO.

I ACKNOWLEDGE AND ACCEPT THE CONDITIONS AS SET FORTH IN THE POLICY STATEMENT AND AGREEMENT FOR USE OF THE MUSEUM.

Military Sponsor's Signature
(Name/Rank/Military Status)

Address/Phone and FAX Number (Please Print)